PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number						
9	PATENT A	10/624 266												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTI	TY	OR	OTHER SMALL		
TOTAL CLAIMS			24			.		RATE	F	EE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 38	35.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			24 minus 20=		· 4			X\$ 9=	:		OR	X\$18=	72	
INDEPENDENT CLAIMS			minus 3 =		* 3			X43=			OR	X8 <b>/</b> 5=	252	
ML	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT					+145=	:		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							•	TOTAL	- [		OR	TOTAL		
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3							SMAL	L ENT	TTY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVICE PAID I	EST BER DUSLY	PRESENT EXTRA		RATE	TIC	DDI- DNAL EE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***		=		X43=			OR	X86=		
⋖	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		-		+			. 200		
								+145=	<u> </u>		OR	+290= TOTAL		
								ADDIT. FEE			OR ADDIT. FEE			
		(Column 1) CLAIMS		(Colum	EST	(Column 3)	1 г		ΔΓ	DDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIC	NAL EE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***		=		X43=			OR	X86=		
	FIRST PRESE	ENDENT	ENDENT CLAIM			. 1 4 5	1			+290=				
								+145=			OR	TOTAL		
	`	(Column 3)	Al	DDIT. FE			OR ,	ADDIT. FEE						
		. –		1				1551						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	TIO	DI- NAL EE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	l	X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***		=		X43=			OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAI						▎├		1					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145= TOTAL	1_		OR	+290=		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ADDIT. FEE		
		ber Previously Paid					r foun	d in the a	ppropri	ate box	in col	umn 1.		